Revocation of Attorney/Domestic Representative and/or Appointment of Attorney/Domestic Representative

Handwritten Signature

Signature Section:
Signature:
Date: 27 March 2014
Signatory's Name: **LUCIA CAPORUSCIO**
Signatory's Position: **Authorised Signatory**

Signatory's Phone Number: +44 (0) 1534 811300

NOTE TO APPLICANT: When filed as part of the electronic form (i.e., scanned and attached as an image file), include only the signature page (no declaration is required, nor should any other information from the actual revocation be included).

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